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FAX: 703-872-9306

FROM: Lynn Linkowski
Patent Agent II

FAX: 858-526-5950
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DATE: January 31, 2005

PAGES: 9 (Including facsimile cover page)

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Attorney/Agent Docket No.: D1110-4US
Customer No. 29062

Applicant : Short, et al.

Art Unit : 1652

Serial No. : 09/880,729

Examiner : M. N. Rao

Filed : June 12, 2001

Title : Enzymes Having Carboxymethyl Cellulase Activity And Methods Of Use Thereof

Papers attached

- Transmittal letter (1 page)
- Revocation and New Power of Attorney (2 pages)
- Fee transmittal form (1 page + duplicate)
- Petition for Revival of an Application for Patent Abandoned Unintentionally Under 37 CFR 1.137(b) (2 pages)
- Petition for 5 month Extension of Time (1 page)

Diversa Corporation
4955 Directors Place, San Diego, California 92121
Tel: (858) 526-5000 / Fax: (858) 526-5050

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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

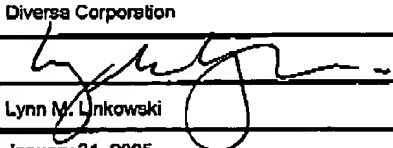
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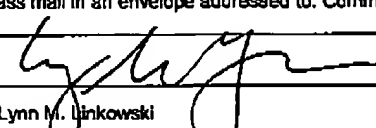
TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/880,729	
	Filing Date	June 12, 2001	
	First Named Inventor	Jay SHORT	
	Art Unit	1652	
	Examiner Name	M. N. Rao	
Total Number of Pages in This Submission	9	Attorney Docket Number	D1110-4US

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input checked="" type="checkbox"/> Revival of Application - Petition Abandoned Unintentionally <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fax cover sheet (1 page)
Remarks Customer number 29062		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Diversa Corporation		
Signature			
Printed name	Lynn M. Linkowski		
Date	January 31, 2005	Reg. No.	47,320

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Lynn M. Linkowski	Date	January 31, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Dated: 1/31/05Signature: [Signature]

(Lynn Linkowski)

Docket No.: D1110-4US
Application No.: 09/880,729

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Jay M. SHORT et al.

Application No.: 09/880,729

Confirmation No.: 6449

Filed: June 12, 2001

Art Unit: 1652

For: Enzymes Having Carboxymethyl Cellulase
Activity And Methods Of Use Thereof

Examiner: M. N. Rao

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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REVOCATION AND NEW POWER OF ATTORNEY

Dear Sir:

Under 37 CFR §3.73(b) DIVERSA CORPORATION, a Delaware corporation, certifies that it is the assignee of 100% of the right, title and interest in the patent application above by virtue of an Assignment from the inventors of the patent application identified above. The Assignment was recorded in the Patent and Trademark Office at Reel 012611/Frame 0620 on February 12, 2002.

The undersigned has reviewed all the documents in the chain of title of the patent application identified above and, to the best of the undersigned's knowledge and belief, title is in the Assignee identified above.

The undersigned, whose title is supplied below, is empowered to act on behalf of the assignee.

The undersigned, acting on behalf of the assignee, hereby revokes all powers of attorney previously granted in the application and appoints the practitioners at Customer Number 29062,

Docket No.: D1110-4US
Application No.: 09/880,729

with full power of substitution and revocation, to prosecute the application and to transact all business in the United States Patent and Trademark Office connected therewith.


All correspondence regarding the application should be sent to:

Lynn Linkowski, Reg. No. 47,320
Diversa Corporation
Intellectual Property Department
PO Box 910550
San Diego, California 92191-0550
(858) 526-5450

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Respectfully submitted,

Date: Jan. 31, 2005


Carolyn Erickson
Vice President, Intellectual Property

PTO/SB/17 (12-04V2)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1830.00

Complete if Known

Application Number 09/880,729
Filing Date June 12, 2001
First Named Inventor Jay SHORT
Examiner Name M. N. Rao
Art Unit 1652
Attorney Docket No. D1110-4US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 50-0661 Deposit Account Name: Diversa Corporation

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below

☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17

☒ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

- 20 or HP = _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

- 3 or HP = _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)**

- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

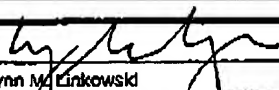
Other (e.g., late filing surcharge): 2255 Ext. within 5th month (\$1080); 2453 Pet. Revive Unintentional (\$750)

Fees Paid (\$)

1830.00

SUBMITTED BY

Signature



 Registration No.
(Attorney/Agent) 47,320

Telephone 858-526-5450

Name (Print/Type) Lynn M. Linkowski

Date January 31, 2005

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

For Fee Processing

PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0851-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known Application Number <u>09/880,729</u> Filing Date <u>June 12, 2001</u> First Named Inventor <u>Jay SHORT</u> Examiner Name <u>M. N. Rao</u> Art Unit <u>1652</u> Attorney Docket No. <u>D1110-4US</u>	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT	(\$)	1830.00	

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 50-0661 Deposit Account Name: Diversa Corporation
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
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Design	200	100	100	50	130	65	
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Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

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Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims	Extra Claims	Fee (\$)
Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)
Fee Paid (\$)	Fee Paid (\$)	

- 20 or HP = _____ x _____ = _____
 HP = highest number of total claims paid for, if greater than 20.

Indep. Claims - 3 or HP = _____ x _____ = _____
 HP = highest number of independent claims paid for, if greater than 3.

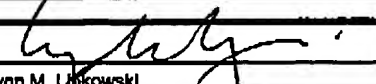
3. APPLICATION SIZE FEE

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Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 = _____	/ 50 = _____	(round up to a whole number) x _____		

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)	Fees Paid (\$)
Other (e.g., late filing surcharge): 2255 Ext. within 5th month (\$1080); 2453 Pat. Revive Unintentional (\$750)	1830.00

SUBMITTED BY		
Signature 	Registration No. 47,320 (Attorney/Agent)	Telephone 858-628-6450
Name (Print/Type) Lynn M. Luskowski	Date January 31, 2005	

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